

I.S.T 2010 FALL AFTER SCHOOL BASEBALL CLINICS FOR WESTPORT LITTLE LEAGUE REGISTRANTS

OPEN TO ALL: Kindergarten, 1st/2nd, 3rd grade and 4th/5th grade Baseball Players

(Program held at Greens Farms Elementary School)

Clinics will focus on supplementing fall season games and practices with more focused skills development clinics. Each day players will be brought through a series of drills to improve their hitting, fielding, and pitching technique.

Players will also learn baseball running and how to react during game situations.

Kindergarten, 1st/2nd, 3rd, and 4th/5th grade baseball programs

Greens Farms Elementary School Little League clinics

Kindergarten	GF1 - Tuesday Sept 7 th , 14 th , 21 st , 28 th , Oct 5 th , 12 th , 19 th , 26 th	3:15PM to 4:15PM
1 st /2 nd grade Baseball	GF2 - Wednesday Sept 8 th , 15 th , 22 nd , 29 th , Oct 6 th , 13 th , 20 th , 27 th	3:15PM to 4:15PM
1 st /2 nd grade Baseball	GF3 - Friday Sept 3 rd , 10 th , 17 th , 24 th , Oct 1 st , 8 th , 15 th , 22 nd	3:15PM to 4:15PM
3 rd grade Baseball	GF4- Monday Sept 13 th , 20 th , 27 th , Oct 4 th , 18 th , 25 th , Nov 1 st , 8 th	3:15PM to 4:15PM
4 th /5 th grade Baseball	GF5- Thursday Sept 2 nd , 16 th , 23 rd , 30 th , Oct 7 th , 14 th , 21 st , 28 th	3:15PM to 4:15PM

Cost: \$250 Each session is limited to 16 players

Important program information

Weather cancellation number: 203-604-0587

Players will be picked up inside Greens Farms Elementary School at dismissal by I.S.T.'s staff in the auditorium. Each player will need a written note each week giving them permission to participate in the program. Rain cancellations will be made up by adding or extending future classes.

We will be using the main field on campus.

You will receive a registration confirmation via email.

Make your selections: Keep top portion with dates

Greens Farms Clinics: () GF1 Kindergarten Tuesday \$250 () GF2, 1st/2nd Wed \$250

() GF3, 1st/2nd Friday \$250 () GF4, 3rd grade Monday () GF5 4th/5th grade Thursday

Last _____ First _____ age _____ grade _____
Street _____ City _____ ST _____ Zip _____ Home _____
Phone _____ email _____

Allergies _____ Emergency Contact _____

Parent/Guardian Name & Address _____ Phone _____

Keep top portions with dates.

Check/money order payable to I.S.T.

Mail: I.S.T. Baseball Headquarters, 25 Van Zant St. Unit 3B Norwalk, CT. 06855

Email: istkatz22@yahoo.com for more information